

U.S. 1031 EXCHANGE SERVICES, INC.
3400 South Tamiami Trail
Sarasota, Florida 34239
(941) 366-1300 • FAX (941) 366-6973
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1031 EXCHANGE INFORMATION QUESTIONNAIRE

In a 1031 Exchange, the taxpayer (Exchanger) transfers one or more properties (**Relinquished Property**) and, in exchange, receives one or more properties (**Replacement Property**). It is the purpose of this Questionnaire to obtain from the Exchanger certain information which will assist U.S. 1031 Exchange Services, Inc. to perform its function of Qualified Intermediary relative to the Exchange (**Please type or print all information**).

1. Address of Relinquished Property (the property or properties you intend to sell, out of which the proceeds will be escrowed with U.S. 1031 Exchange Services, Inc. for later reinvestment into the Replacement Property):

2. Is the Relinquished Property currently under contract to be sold? Yes _____ No _____
(If "Yes", please attach copy of the real estate contract/purchase agreement.)

3. Name of Exchanger (exactly as on Relinquished Property deed or deeds): _____

_____ attach copy of deed(s)

4. Address of Exchanger: _____

Telephone: _____ FAX: _____

Email Address of Exchanger: _____

5. Taxpayer ID Number of Exchanger (Soc. Sec. Number or EIN): _____

6. Have you been involved in 1031 Exchange(s) before? Yes _____ No _____ If yes, please provide the information below:

(a) How many times: _____

(b) Approximate year(s) of exchange(s): _____

(b) Name of Intermediary: _____

(c) Were you satisfied with the Intermediary's services? Yes _____ No _____ If no, please describe any dissatisfaction:

7. Name, address and telephone/FAX of your tax advisor:

Name: _____

Address: _____

Telephone: _____ FAX: _____

Email Address: _____

8. Have you discussed the exchange for which you are requesting Intermediary services from U.S. Exchange Services, Inc. with your tax advisor? Yes _____ No _____ If “No”, please discuss the exchange with your tax advisor. U.S.1031 Exchange Services, Inc. does not provide tax advice, so you will need to involve your tax advisor at an early stage to be sure that the exchange will create the result you are planning.

9. Is the tax advisor you identified above the same person who prepares your Federal income tax return? Yes _____ No _____ If “No”, please identify the person who prepares your income tax return:

Name: _____

Address: _____

Telephone: _____ FAX: _____

Email Address: _____

10. Has your tax return been audited by the IRS? Yes _____ No _____ Did the audit have anything to do with a 1031 Exchange? Yes _____ No _____ If the audit had anything to do with a 1031 Exchange, did the audit result in any adverse action being taken by IRS? Yes _____ No _____ If “Yes”, what was the adverse action and what was the result of the adverse action?

11. Approximately how much capital gain on the relinquished property or properties are you trying to shelter from current taxation as a result of the 1031 Exchange (net sale price minus basis)? \$_____, and approximately how much money (“net cash due seller” on the closing statement) will go into escrow with us from sale of the relinquished property? \$_____. **You may roughly approximate both numbers for the blanks in this paragraph. The purpose of this information is to give us an idea of how “big” the exchange is.**

12. **Name, address, EMAIL and phone number of the closing agent or closing attorney for the sale of the relinquished property:**

Name: _____

Address: _____

Telephone: _____ Email: _____

13. **Reverse Exchange?** If you think you may have to close the purchase of your Replacement Property before you sell your Relinquished Property, check here: _____

Let us know what sale price you think or hope you will receive when you do sell your Relinquished Property (unless you already have a sale contract on the Relinquished Property, this is just your best guess) \$ _____

If you end up selling your Relinquished Property first, we will not charge you the Reverse Exchange fee surcharge described in "Reverse Exchange" in this website.

Please provide the name, address, phone and fax of the closing agent for the purchase of your replacement property:

14. Other comments or information: _____

Date signed: _____ Signature: _____

Print Name: _____

When completed, please fax this form to (941) 366-6973, send to the address above or scan and email to jeff@us1031.com or jmehan@us1031.com

Please tell us how you found us:

___ Newspaper Ad. If so, which one? _____

___ Magazine Ad. If so, which one? _____

___ Referral. If so, from whom? _____

___ Picked up brochure. If so, from where? _____

___ Internet. If so, which search engine? _____

___ Billboard/sign. If so, where? _____

___ Used us before. If so, when? _____

___ Other. _____